

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application No.	10/043,534
	Filing Date	January 10, 2002
	First Named Inventor	Homer Chou
	Group Art Unit	1765
	Examiner Name	Vinh, Lan
	Attorney Docket No	00044X215193
	Client Reference No	215193

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This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

1. Submission required under 37 CFR 1.114 a. <input checked="" type="checkbox"/> Previously submitted i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on January 12, 2006 (Any unentered amendment(s) referred to above will be entered.) ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on iii. <input type="checkbox"/> Other: b. <input type="checkbox"/> Enclosed i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input type="checkbox"/> Form PTO-1449 v. <input type="checkbox"/> Copies of References listed in Form PTO-1449 (except for U.S. patents and applications) vi. <input type="checkbox"/> Other:								
2. Miscellaneous a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.) b. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 c. <input type="checkbox"/> Other:								
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. <input checked="" type="checkbox"/> Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith. i. <input checked="" type="checkbox"/> RCE fee of \$395.00 (small entity) required under 37 CFR 1.17(e) ii. <input type="checkbox"/> One-month extension of time fee of \$120.00 iii. <input type="checkbox"/> An extension for _____ has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total amount of extension now requested. iv. <input checked="" type="checkbox"/> Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee. v. <input type="checkbox"/> Suspension of action fee of \$130.00 (37 CFR 1.17(i)) vi. <input type="checkbox"/> Other: vii. <input type="checkbox"/> Claim fee								
CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE
TOTAL	24	MINUS	27	= 0	x 25=	\$0.00	x 50=	\$0.00
INDEPENDENT	1	MINUS	3	= 0	x 100=	\$0.00	x 200=	\$0.00
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 180=	\$0.00	+ 360=	\$0.00
Claim fee total								\$0.00
Total amount to be charged to Deposit Account								\$395.00
b. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216								

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DATE: MARCH 13, 2006

NUMBER OF PAGES (INCLUDING
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OUR REFERENCE: 215193

FROM: JOHN KILYK, JR./KLM
REGISTRATION NO. 30,763

DIRECT LINE: (312) 616-5665

TO: MAIL STOP RCE
UNITED STATES PATENT AND TRADEMARK OFFICE
COMMISSIONER FOR PATENTS
ALEXANDRIA, VA 22313

FACSIMILE NUMBER: (571) 273-8300

IN RE APPLN. OF: CHOU ET AL.
APPLICATION NO. 10/043,534
FILED: JANUARY 10, 2002
DOCKET NO.: 00044X215193 (LVM REFERENCE NO. 215193)

ATTACHED PLEASE FIND THE FOLLOWING DOCUMENTS:

- REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL — IN DUPLICATE (4 PAGES TOTAL)

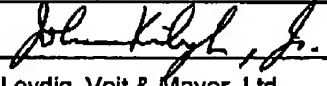
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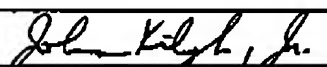
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In re Application of Homer Chou
Application No. 10/043,534

REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL
(CONTINUED)

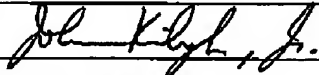
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED			
Name (Print/Type)	John Kilyk, Jr.	Registration No. (Attorney/Agent)	30,763
Signature		Date	March 13, 2006
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6780	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)

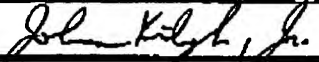
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Name (Print/Type)	John Kilyk, Jr.		
Signature		Date	March 13, 2006

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